

01-23-02

PTO/SB/05

Approved for use through 10/31/2002. OMB 0651-0047
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.

GNVPN.037BUSA

First Inventor

Guangping Gao et al

Title

Cell Lines and Constructs Useful in
Production of E1-Deleted Adenoviruses in
Absence of Replication-Competent Adenovirus

Express Mail Label No.

ET033621342US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 26]
(preferred arrangement set forth below)
- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table,
or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 2]
5. ☐ Oath or Declaration [Total Pages 28]
- a. ☐ Newly executed (original or copy)
b. ☒ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
- i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.63(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
i. ☐ CD-ROM or CD-R (2 copies); or
ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☒ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.
17. ☒ Other: Assignee information attached

If, in a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: 09, 659,203

Prior application information: Examiner: S. Foley

Group Art Unit: 1648

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been lawfully omitted from the submitted application parts.

19. DO NOT WRITE IN THESE SPACES

☒ Customer Number or Bar Code Label 00270 or ☐ Correspondence address below

Name Cathy A. Kodroff, Esquire

Howson and Howson

Address Spring House Corporate Center, Box 457

City Spring House State PA Zip Code 19477

Country USA Telephone (215) 540-9200 Fax (215) 540-5818

Name (Print/Type) Cathy A. Kodroff, Esquire Registration No. (Attorney/Agent) 33,980

Signature Cathy A. Kodroff Date 1/16/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



00270

PATENT TRADEMARK OFFICE

Assignee Information

The Trustees of the University of Pennsylvania
Philadelphia, Pennsylvania 19104-3147

10053194-011602

Express Mail No. ET033621342US



00270

PTO/SB/17 (10-01)

Approved for use by USPTO 10/31/2002. OMB 0651-0032

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

Application Number	
Filing Date	01/16/2002
First Named Inventor	Guangping Gao et al
Examiner Name	S. Foley
Group Art Unit	1648
Attorney Docket No.	GNVPN.037BUSA

TOTAL AMOUNT OF PAYMENT (\$)

824.00

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	08-3040
Deposit Account Name	Howson and Howson

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Code (\$)	Small Entity Code (\$)	Fee	Fee Description	Fee Paid
105	130	205	65	
127	50	227	25	
139	130	139	130	
147	2,520	147	2,520	
112	920*	112	920*	
113	1,840*	113	1,840*	
115	110	215	55	
116	400	216	200	
117	920	217	460	
118	1,440	218	720	
128	1,960	228	980	
119	320	219	160	
120	320	220	160	
121	280	221	140	
138	1,510	138	1,510	
140	110	240	55	
141	1,280	241	640	
142	1,280	242	640	
143	460	243	230	
144	620	244	310	
122	130	122	130	
123	50	123	50	
126	180	126	180	
581	40	581	40	
146	740	246	370	
149	740	249	370	
179	740	279	370	
169	900	169	900	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

1. BASIC FILING FEE

Large Entity Code (\$)	Small Entity Code (\$)	Fee	Fee Description	Fee Paid
101	740	201	370	740.00
106	330	206	165	
107	510	207	255	
108	740	208	370	
114	160	214	80	

SUBTOTAL (1) (\$)

740.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
19	-20** = 0	18.00	0.00
4	-3** = 1	84.00	84.00
Multiple Dependent		280.00	0.00

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

84.00

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type)	Cathy A. Kodroff, Esquire	Registration No. (Attorney/Agent)	33,980	Complete (if applicable)	Telephone	(215) 540-9200
Signature	<i>Cathy A. Kodroff</i>	Date	1/16/02			

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-0288.

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